Overcoming Anxiety Seminar

There is no need to be
Anxious
about attending this seminar!
— Dr. Lionel.

Program: Understanding Anxiety, Anxiety and Fear, Panic & Panic Disorder, Generalised Anxiety Disorder (GAD), Obsessive-Compulsive Disorder (OCD), Social and specific Phobias, Post-Traumatic Stress, Fight & Flight Responses, Techniques for Overcoming, A Practical Application Utilising the Coping Strategies (Public Speaking) Question & Answer Session

Free public seminar

Overcoming Anxiety

1. Understanding Anxiety
2. Anxiety, Fear, Panic & Phobia
3. Fight & Flight Responses
4. Techniques for Overcoming

with Lionel Hartley, PhD

Slide 1 – Focus

FULL TRANSCRIPT

Slide 2 – Title Slide

Overlay: Video clip

Slide 3 – Who is your speaker for today?

An excerpt from a book I wrote entitled: “Not Finished Yet - Chronicles in the Life of Peter Blank”, published in the year 2000.

It was Peter’s first day in the new land. With a seven-cubic-foot cabin trunk and an airline travel bag, Peter struggled from an airport shuttle ’bus onto the footpath outside the City Central Railway Station.

Having been warned of the danger of leaving luggage unattended in the big city, he searched in vain for a luggage trolley.

With difficulty, he then manually hauled the trunk to the luggage depot to have it put on the train for him.

He was, however, told that “due to an industrial dispute” luggage would only be accepted at a named station elsewhere in the city — a station he would have to “go to

anyway to change trains" so as to get to his chosen destination.

He was also told that not only were there no luggage trolleys or porters, but that the only way to the underground platform was on an escalator. The stairs were closed for re-tiling and there were no elevators.

With a great expenditure of breath and perspiration, Peter managed to get the trunk to the top of the escalator – a clanking mechanical staircase that hurried passengers down into the bowels of the railway station.

The wide trunk only just fitted between the stationary sides of the moving staircase and they descended while Peter stood on the step above, balancing the trunk with one hand while holding his travel bag with the other.

As a herd of hurrying commuters pressed behind him, Peter was to learn something he had not even imagined. The walls of this staircase tapered together as they neared the bottom. This had the unfortunate effect of wedging the cabin trunk in mid-air.

The cabin trunk stopped. Peter did not.

In fact, the unrelenting escalator dragged him under the wedged cabin trunk, and it was there that he stopped! Of course, the escalator continued to move, each step clouting his head

and piling angry commuters upon him and the cabin trunk.

Somehow, someone found a switch to stop the mechanical monster. And, with some difficulty and an abundance of Australian colloquialisms, Peter was extracted, carried, cursed, and bundled onto a waiting train in an almost singular movement.

The commuter train, in contrast to the escalator, was amazingly free of passengers – Peter guessed that most had sought safety from him and his trunk in other carriages.

Knowing he was to leave the train after only a few stops, he waited with his trunk, just inside the door, rather than try to find a seat large enough for himself and his travelling companion.

This would have been a good idea if, at the next station, a convoy of bicyclists, each with an antler-handled velocipede, had not tried to squeeze into the space he occupied.

The air was filled with phrases in the Australian vernacular – words of unknown meaning yet unmistakable intent.

Finally the troublesome trunk, which seemed to grow heavier and larger by the hour, was lodged at the luggage depot at the named station.

Overcoming [4] Anxiety

Anxiety...

Everyone is familiar with anxiety; it is a problem of epidemic proportions. Although many will struggle with overcoming it.

Yet as prevalent as it is, anxiety and worry are some of the most counter-productive things that we can do.

Anxiety, like worry, is like a rocking chair – it will give you something to do, but it won't get you anywhere.

How should we approach the problem of anxiety? What can we do about it? Perhaps by first understanding the problem.

Slide 4 – What is Anxiety?

Anxiety is the interest paid on trouble before it is due. (William Ralph Inge, 1860-1954)

Like other emotions, fear is a normal part of being human. It is a reaction to danger or something you believe to be threatening. It increases our awareness of the environment. It reminds us to protect ourselves. However, it can also move out of balance.

1. Anxiety is distress about future uncertainties...

a. It is characterized by mental agitation and uneasiness

b. It may be mild or severe

2. It primarily has to do with what may happen in the future, either near or distant

Slide 5 – Anxiety Vs Fear

Several years ago, a televised circus act with Bengal tigers was broadcast live. The tiger trainer went into the cage with several tigers to do a routine performance. The door was locked behind him. The spotlights highlighted the cage, the television cameras moved in close, and the audience watched in suspense as the trainer put the tigers through their act.

However, in the middle of the performance, the lights went out! For 20 or 30 seconds the trainer was locked in a dark cage with Bengal tigers, a whip and a chair. The tigers could see the trainer, but he could not see them!

After the event was over, in an interview, the trainer was asked how he felt about his situation in the cage. He first admitted to the chilling fear of the situation, but he pointed out that the tigers did not know that he could not see them.

He said, “I just kept cracking my whip and talking to them until the lights came on. They never knew I could not see them as well as they could see me.”

This story says something about many fears. Face them and go on doing the best you can.

Difference between fear and anxiety.

Anxiety:

- Anxious apprehension and worry that is a more general reaction that is out of proportion to threats in environment

- Future oriented. “People gather bundles of sticks to build bridges they never cross.”

- Can be adaptive if not excessive

Let me explain this last point. Adaptive behaviour is any type of behaviour that is used to adjust to another type of behaviour or situation.

This is often characterized as a kind of behaviour that allows an individual to change an unconstructive or disruptive behaviour to something more constructive. These behaviours are most often social or personal behaviours.

For example a constant repetitive action could be re-focused on something that creates or builds something. In other words the behaviour can be adapted to something else.

Anxiety produces behaviours that can be adaptive if the anxiety is not excessive.

The opposite, maladaptive behaviour, is a type of behaviour that is often used to reduce one's anxiety, but the result is dysfunctional and non-productive.

For example, avoiding situations because you have unrealistic fears may initially reduce your anxiety, but it is non-productive in alleviating the actual problem in the long term.

Overlay slide 5

Contrast that with fear:

One Halloween night, a neighbourhood practical joker decided to frighten the young "trick-or-treaters" who rang his doorbell. He put on a floor-length black cape, a black hat fitted with devil's horns, and a hideous mask that seemed to combine the most gruesome features of "Dracula," "Frankenstein," and the "Wolf Man." Then he waited.

Finally, his doorbell rang. He turned off all the lights and, shining a flashlight on his mask,

he opened the door and pierced the night air with an eerie scream.

Then he looked down and saw standing before him a tiny, golden-haired five-year-old, dressed as a dainty fairy. The little tyke stared wide-eyed for a moment.

Then she raised her eyes up along the massive black cape, looked straight into the hideous mask, smiled and said, “Is your mommy home?”

Fear is

- Experienced when a person is faced with real and immediate danger.

- Present-oriented

- Can be adaptive

When you fear that the worst will happen, your own thoughts may help to bring it about.

Someone once wrote, “Fear is the wrong use of imagination. It is anticipating the worst, not the best that can happen.”

A salesman, driving on a lonely country road one dark and rainy night, had a flat. He opened the boot—no wheel brace. The light from a farmhouse could be seen dimly up the road. He set out on foot through the driving

rain.

Surely the farmer would have a wheel brace he could borrow, he thought. Of course, it was late at night—the farmer would be asleep in his warm, dry bed. Maybe he wouldn't answer the door. And even if he did, he'd be angry at being awakened in the middle of the night.

The salesman, picking his way blindly in the dark, stumbled on. By now his shoes and clothing were soaked. Even if the farmer did answer his knock, he would probably shout something like, "What's the big idea waking me up at this hour?"

This thought made the salesman angry. What right did that farmer have to refuse him the loan of a wheel brace? After all, here he was stranded in the middle of nowhere, soaked to the skin. The farmer was a selfish clod—no doubt about that!

The salesman finally reached the house and banged loudly on the door. A light went on inside, and a window opened above. A voice called out, "Who is it?"

His face white with anger, the salesman called out, "You know darn well who it is. It's me! And you can keep your [expletive] wheel brace. I wouldn't borrow it now if you had the

last one on earth!”

Anxiety is more than just feeling stressed or worried. Anxious feelings are a normal reaction to a situation where a person feels under pressure – for example, meeting work deadlines, sitting exams or speaking in front of a group of people.

However, for some people these anxious feelings happen for no apparent reason or continue after the stressful event has passed.

For a person experiencing anxiety, anxious feelings cannot be brought under control easily.

Anxiety can be a serious condition that makes it hard for a person to cope with daily life.

Slide 6 – Epidemiology of Anxiety

Anxiety disorders are more common than any other form of mental disorders.

Anxiety is the most common mental health condition in Australia. On average, one in four people - one in three women and one in five men – will experience anxiety at some stage in their life. In a 12-month period, over two million Australians experience anxiety according to the Australian Bureau of Statistics

National Survey of Mental Health and Wellbeing, 2008

Anxiety is common, but the sooner people with anxiety get help, the more likely they are to recover.

Comorbidity (Morbid simply means ill health; comorbid means more than one health issue appearing concurrently):

High comorbidity among different anxiety disorders. Also there is a high level of comorbidity between anxiety and depression

Slide 7 – Difference between anxiety and anxiety disorder:

"...psychological disorders characterized by tension, over-activity of the autonomic nervous system, expectation of impending disaster, and continuous vigilance for danger."

— Neil R Carlson, Physiology of Behaviour, 2000

Slide 8 – Anxiety should be treated if it is

1. Intense (more than people usually feel)

2. Chronic (felt many times during the day or most days of the week)

3. Limiting (makes it hard to do daily tasks or relate to others).

Treating anxiety can be challenging because fear may affect your ability to trust others and to try new treatments. Living with a constant sense of being in danger is exhausting.

Slide 9 – Other symptoms of anxiety

People with anxiety go to the doctor three times more than the average person. Sixty percent of those with anxiety will have other problems linked to anxiety, such as irritable bowel syndrome (IBS), depression, or substance use.

Other symptoms that are linked to anxiety include:

Tachicardia (rapid heart beat), Headaches & migraines, Irritability, Muscle tension, Poor concentration, Restlessness, Sleep problems, Sweats, Fatigue (tiring easily) and Trembling.

Slide 10 – What causes Anxiety?

It’s often a combination of factors that can lead to a person developing anxiety.

• Family history of mental health problems: People who experience anxiety often have a history of mental health problems in their family.

However, this doesn’t mean that a person will automatically develop anxiety if a parent or close relative has had a mental health condition.

Slide 11 – What causes Anxiety?

• Anxiety is caused by real or imagined threats to our well-being...

a. We feel vulnerable and inadequately protected against these threats

b. Threats such as social rejection, physical injury or disease, poverty, death, and a wide range of other threats

Slide 12 – What causes Anxiety?

• Stressful life events: Stressful events can also trigger symptoms of anxiety. Common triggers include:

- job stress or changing jobs, demotion or promotion, giving a presentation to peers or superiors, deadlines & quotas

- a change in living arrangements, moving house, changing schools, incarceration

- pregnancy and giving birth, miscarriage & stillbirth

- family and relationship problems, money, sexual problems, false accusations, changes in marital status (wedding, separation, divorce, widowhood)

- experiencing a major emotional shock following a stressful or traumatic event such as disaster, accident, war, burglary

- experiencing verbal, sexual, physical or emotional abuse or trauma

- death or loss of a loved one or treasured object.

Slide 13 – What causes Anxiety?

• Physical health problems:

Continuing physical illness can also trigger anxiety or complicate the treatment of the anxiety or the physical illness itself. Common conditions that can do this include:

- hormonal problems (e.g. overactive thyroid)

- diabetes or other life-changing disease

- asthma & breathing difficulties

- cancer or heart disease, etc

If there is concern about any of these conditions, ask a doctor for medical tests to rule out a medical cause for the feelings of anxiety.

Slide 14 – What causes Anxiety?

• Substance use: Heavy or long-term use of substances such as alcohol, cannabis, amphetamines or sedatives (such as benzo-diaz-epines) can actually cause people to develop anxiety, particularly as the effects of the substance wear off. People with anxiety may find themselves using more of the substance to cope with withdrawal-related anxiety, which can lead to them feeling worse.

Slide 15 – What causes Anxiety?

• Personality factors: Some research suggests that people with certain personality traits are more likely to have anxiety. For example, children who are perfectionists,

easily flustered, lack self-esteem or want to control everything, sometimes develop anxiety during childhood or as adults.

Slide 16 – Anxiety has three main causes and one of many responses...

a. Insecurity: something bad is going to happen

That's finding on your new job that your name is written on the door in chalk, and there's a wet sponge hanging next to it.

b. Helplessness: there is nothing I can do

c. Isolation: there is no one to help me. Am I alone or is it just me?

— These causes may operate individually or in various combinations. Emotionally, they cause just as much anxiety if they are imagined as if they were real.

Anxiety chemically triggers a rush of adrenalin resulting in the body's readiness for the fright-fight-flight response. But these are not the only options. We fight, flee, freeze, fling or faint.

These are autonomic responses. However can choose how we respond and I am using the

word fortify – signifying what we do with our mind. I will explain this later in detail when I use a practical example of overcoming anxiety.

Slide 17 – Types of anxiety (their signs and symptoms)

There are many types of anxiety, with a range of signs and symptoms. It's important to note that what I am sharing here is only a guide to recognising different types of anxiety. My presentation will not provide a diagnosis – for that you need to see a health professional.

Today, before I provide the promised useful coping strategies, I will briefly mention: Social Phobia, Generalised Anxiety Disorder, Specific Phobias, Obsessive-Compulsive Disorder,

Post-Traumatic Stress Disorder and Panic Disorder

Slide 18 – Social phobia

A person with social phobia has an intense fear of criticism, being embarrassed or humiliated, even just in everyday situations, for example, public speaking, eating in public, being assertive at work or making small talk.

The person with Social Phobia is likely to

have:

• felt fear of one or more social or performance situations where you may be criticised

• the situation is avoided or endured with anxiety and distress

• the anxiety interferes with normal routine, working life, social functioning, or you are distressed about the problem

• the fear is generally identified as unreasonable

Slide 19 – Generalised Anxiety Disorder (GAD)

A person feels anxious on most days, worrying about lots of different things, over a period of six months or more on more days than not.

The person with Generalised Anxiety Disorder is likely to have:

• felt very worried

• found it hard to stop worrying

• found that your anxiety made it difficult to carry out everyday activities (e.g. work, study, seeing friends and family)?

If they answered ‘yes’ to all of these questions, check that they have also experienced three or more of the following:

• felt restless or on edge

• felt tired easily

• had difficulty concentrating

• felt irritable

• had muscle pain (e.g. sore jaw or back)

• had trouble sleeping (e.g. difficulty falling or staying asleep or restless sleep)?

Slide 20 – Specific phobias

A person feels very fearful about a particular object or situation and may go to great lengths to avoid the object or situation, for example, having an injection or travelling on a plane.

There are many different types of phobias. If this person:

• felt very nervous when faced with a specific object or situation e.g.:

- flying on an aeroplane

- going near an animal or other creature

- receiving an injection

• avoided a situation that might cause you to face the specific phobia, for example,

- needed to change work patterns

- not getting health check-ups

• found it hard to go about daily life (e.g. working, studying or seeing friends and family) because they are trying to avoid such situations.

Here's a little test to see if you're paying attention. This is a trick question. What sort of insect is on the ladies' face in the picture?

This is not an insect. An insect has six legs. A spider has eight legs and is an arachnid, not an insect.

(An arachnid is an air-breathing arthropod characterized by simple eyes and four pairs of legs)

Slide 21 – Obsessive compulsive disorder (OCD)

A person has ongoing unwanted/ intrusive thoughts and fears that cause anxiety. Although the person may acknowledge these thoughts as silly, the person often finds him or

herself trying to relieve their anxiety by carrying out certain behaviours or rituals. For example, the most common is a fear of germs and contamination that can lead to constant washing of hands and clothes.

The person with OCD is likely to have:

• had repetitive thoughts or concerns that are not about real life problems (e.g. thoughts that they or people close to them will be harmed)

• performed the same activity repeatedly and in a very ordered, precise and similar way each time e.g.:

- constantly washing hands or clothes, showering or brushing teeth

- constantly cleaning, tidying or rearranging in a particular way things at home, at work or in the car

- constantly checking that doors and windows are locked and/or appliances are turned off

• felt relieved in the short term by doing these things, but soon felt the need to repeat them

• recognised that these feelings, thoughts and behaviour patterns are unreasonable and

• found that these thoughts or behaviour patterns take up more than one hour a day and/ or interfered with their normal routine (e.g. working, studying or seeing friends and family).

Slide 17 – Post-Traumatic Stress Disorder (PTSD)

This can happen after a person experiences a traumatic event (e.g. war, assault, accident, disaster).

Symptoms can include difficulty relaxing, upsetting dreams or flashbacks of the event, and avoidance of anything related to the event. PTSD is diagnosed when a person has symptoms for at least a month.

The person with Post-Traumatic Stress Disorder is likely to have:

• experienced or seen something that involved death, injury, torture or abuse and felt very frightened or helpless

• had upsetting memories or dreams of the event for at least one month

• found it hard to go about daily life (e.g. difficulty working, studying or getting along with family and friends).

If they answered ‘yes’ to all of these questions and have also experienced at least three of the following:

• avoided activities that are a reminder of the event

• had trouble remembering parts of the event

• felt less interested in doing things they used to enjoy

• had trouble feeling intensely positive emotions (e.g. love or excitement)

• thought less about the future (e.g. about career or family goals)?

and have experienced at least two of the following:

• had difficulty sleeping (e.g. had bad dreams or found it hard to fall or stay asleep)

• become angry or irritated easily

• had trouble concentrating

• felt on guard

• been easily startled.

Slide 23 – Panic disorder

A person has panic attacks, which are intense, overwhelming and often uncontrollable feelings of anxiety combined with a range of physical symptoms.

Within a 10 minute period have they felt four or more of the following:

- sweaty
- shaky
- increased heart rate
- short of breath
- choked
- nauseous or pain in the stomach
- dizzy, light-headed or faint
- numb or tingly
- de-realisation (feelings of unreality) or depersonalisation (feeling detached from yourself or your surroundings)
- hot or cold flushes
- scared of going crazy
- scared of dying?

If they answered ‘yes’ to all of these questions, have they also:

• felt scared, for one month or more, of experiencing these feelings again.

Slide 24 – Panic disorder

Panic disorder is the presence of recurrent, unexpected panic attacks followed by at least 1 month of persistent concern about having another attack; worry about the possible implications of the panic attacks; and behavioural change related to the attacks.

It is important to note that many people with anxiety experience symptoms of more than one type of anxiety disorder. It’s also important to note that what I have shared is only a guide to recognising different types of anxiety. I am not providing a diagnosis - for that you need to see a health professional.

With an understanding of the problem of anxiety, we are closer to overcoming the problem

Slide 25 – Treatments for anxiety

Now, because of a general distrust by many of any profession with *Psych* in the title

(psychologist, psychiatrist, psychoanalyst, psycho-biologist, psycholinguist – the list goes on…), I want do devote some time talking about things that we can do to help ourselves. But first let's look at the traditional treatment options.

There are many health professionals and services available to help with information, treatment and support, and there are many things that people with anxiety can do to help themselves. Effective treatment helps people with anxiety to learn how to control the condition - so it doesn't control them.

The type of treatment will depend on the anxiety being experienced.

Mild symptoms may be relieved with lifestyle changes and self-help (I'll talk about this soon). Where symptoms of anxiety are moderate to severe, psychological and/or medical treatments may be required.

Overlay Slide 25 – Psychological treatments

Psychological treatment may not only help a person to recover, but can also help to prevent a recurrence of anxiety. It has been found to be the most effective way of treating anxiety. There are several different types of psychological treatments, including cognitive behaviour therapy (CBT). Psychological

therapies can be undertaken with a professional, and increasingly, via structured sessions delivered via the internet (with or without support from a professional).

Cognitive behaviour therapy (CBT)

CBT is a structured psychological treatment, which recognises that a person's way of thinking (cognition) and acting (behaviour) affects the way they feel. In CBT, a person works with a professional to look at the patterns of thinking and acting that are either predisposing them to anxiety, or keeping them from improving once they become anxious. Once these patterns are recognised, the person can consciously and deliberately make changes to replace these patterns with new ones that reduce anxiety and enhance their coping skills.

For example, thinking that focuses on catastrophising (thinking the worst, believing something is far worse than it actually is, anticipating things will go wrong) is often linked with anxiety. In CBT, the person works to change these patterns to use a way of thinking that is more realistic and focused on problem-solving. Anxiety is also often heightened when a person actively avoids the things of which he/she is afraid. Learning how to face up to situations that are anxiety-

inducing is also often helpful.

Overlay Slide 25 – Medical treatments

Research shows that psychological treatments are the most effective in helping people with anxiety. However, if symptoms are severe, some medical treatments may be helpful.

Antidepressant medication

Some types of antidepressant medication can help people to manage anxiety. This is usually because anxiety and depression frequently occur together, and some types of anxiety are long lasting and antidepressant medications are considered better to use over longer periods of time than sedatives.

Research indicates that when people have anxiety, there are specific changes that occur in the brain's chemicals - serotonin, noradrenaline and dopamine. Antidepressant medication is designed to correct the imbalance of chemical messages between nerve cells (neurones) in the brain.

The Therapeutic Goods Administration (Australia's regulatory agency for medical drugs) and manufacturers of antidepressants do not recommend antidepressant use in young people under the age of 18. The decision to

start taking antidepressant medication should be made in consultation with a doctor after careful assessment and consideration. Stopping medication should only be done gradually, on a doctor's recommendation and under supervision.

Benzodiazepines

Unlike antidepressants, benzodiazepines (sometimes called sedatives) are designed to be used only for a short time (two or three weeks) or if used intermittently as part of a broad treatment plan - not as the first or only treatment. They can help people cope with anxiety by reducing tension, without making people drowsy.

Benzodiazepines are not recommended for long-term use as they can be addictive. If a person has become dependent, withdrawal symptoms may be quite severe.

A common withdrawal symptom is high anxiety, which paradoxically can worsen the problem and make it difficult to assess whether current anxiety is related to the anxiety disorder or a result of long-term use of the benzodiazepines.

Overlay Slide 25 – Lifestyle changes and self help

Now we come to the part of the seminar that you may have been waiting for. What can we do about overcoming anxiety?

Slide 26 – How to help yourself if you have anxiety

Overlay Slide 26

• If you have a faith, talk to your God about your problem and commit it to His care.

Overlay Slide 26

• (Postpone major life changes)

Making major changes in your life can be stressful at any time. If you're feeling stressed or anxious, it's probably a good idea to try to avoid moving house or changing jobs at this time. Leave them to a time when you're feeling better.

Overlay Slide 26

• Resolve personal conflicts as they arise

Ongoing stress in personal relationships can contribute to anxiety. Learn how to let people know about your feelings so that you can resolve personal conflicts as they come up. Talking to a counsellor or psychologist can

help you find ways to address your problems. The best remedy is to deal with the problem's causes, not just its symptoms.

Overlay Slide 26

• Simplify your life by making your schedule less hectic.

Overlay Slide 26

• Take part in enjoyable activities and learn to relax.

To do this, you need to allocate time to do the things you enjoy, such as exercising, prayer & Bible study, reading, gardening or listening to music.

The Beyond Blue website also has information about reducing stress, including a guided progressive muscle relaxation exercise. You'll find the contact details on some of the handouts.

Also I will later be telling you about a free handout that can be downloaded from our own website that may be useful.

Overlay Slide 26

• Maintain a healthy lifestyle

Eating healthily, exercising regularly and getting enough sleep can help a person to manage the symptoms of anxiety.

Slide 27 • Consider your diet:

Avoid foods containing refined sugar or other simple carbohydrates.

For a nutritional treatment plan to have maximum benefits, avoid simple sugars, coffee & carbonated soft drinks or anything that has caffeine, tobacco, or alcohol as these can cause long-term problems and make it much harder to recover.

Also avoid any kind of amphetamine (speed, ecstasy, ice), as these can worsen symptoms of anxiety.

Include in the diet apricots, asparagus, avocados, bananas, broccoli, blackstrap molasses, brewer’s yeast, brown rice, dried fruits, figs, garlic, green leafy vegetables, legumes, raw nuts and seeds, soy products, whole grains, and yoghurt.

If you eat meat then choose fish (especially salmon). These foods supply valuable minerals such as calcium, magnesium, phosphorus, and potassium, which are depleted by stress.

Try eating small, frequent meals rather than

the traditional three meals a day.

Magnesium supplements may be useful, especially if you suffer from muscle spasms.

Limit or eliminate your intake of animal protein. Concentrate on meals high in complex carbohydrates and vegetable protein.

Perhaps this is best explained using this chart:

Slide 28 - Basic Vs Bonus foods.

Now you are probably already familiar with the Healthy Food Pyramid. I like to look at our food choices using a much simpler formula. I call this "Basic foods Vs Bonus foods".

Basic foods are those that our bodies were designed to consume and utilise to effect the most benefit. Our diet should be primarily made up of these foods: fruits, vegetables, nuts, grains and cereals. Examples of foods in this group would be breads, pasta and potatoes, etc.

Bonus foods, however are not necessary for healthy nutrition and should be used sparingly if at all. These include meat, cheese, cake, biscuits, chocolate, chips, snacks and sweets.

An easy way to determine which group a food is categorised is that Basic Foods are plant based and Bonus Foods are non-plant based.

Overlay Slide 29 (Overlay) – Physical exercise

• Exercise regularly

Daily exercise is one of the most potent treatments for anxiety symptoms.

Physical exercise such as walking, swimming, household chores, playing golf or going to the gym can help relieve the tension in your muscles, relax your mind and distract you from negative thoughts and worries.

Try to do some physical exercise every day, even if it’s just going for a walk. Keep it simple and enjoyable.

Overlay Slide 29

• Get plenty of rest and sleep. A refreshed body can deal better with the tensions and burdens of life. Take a relaxing warm bath before going to sleep.

Overlay Slide 29

• Deep-breathing exercises help to

oxygenate and relax the body.

Breathing exercise

When we are anxious we tend to over breathe. This can cause dizziness, trembling etc. which in turn increases our anxiety.

As our anxiety increases, we breathe even more rapidly and so the anxiety spirals.

Controlled breathing helps overcome the physical effects of anxiety.

Please stand for an activity:

Breathe in slowly to the count of four, pushing your stomach out.

Hold your breath for a moment.

Breathe out slowly, letting your stomach relax.

Repeat until you feel calmer.

You may be seated.

Overlay Slide 29

• Massage with deep thumb pressure along both sides of the spine in an upward and outward motion.

Slide 30 (overlay)

• Dry skin-brushing provides an invigorating feeling and helps rid the body of toxins, which contribute to tenseness and anxious feelings.

Overlay Slide 30

• The lower-extremity cold-water rub is sometimes recommended helps relieve anxiety. No, I have not tried this so I cannot vouch for it’s efficacy, but the general advice is to sit naked on a narrow board that is placed over a bathtub filled with 12 deg C (50 deg F) water, with your feet in the water and a warm bath-towel around your shoulders. Soak a cotton wash-cloth in the water and gently rub over your feet, legs and lower body up to your waist. Continue for ten minutes, then dry the body well and rest for one hour in bed.

Overlay Slide 30

• Learn a relaxation technique and practice it. I’ll talk more about this later.

Overlay Slide 30

• Call a trusted friend or family member. Talking things over can diffuse anxiety.

Overlay Slide 30

• See your doctor or mental health professional for regular check-ups

For some people, it can take a while before they feel well again. It's important to stick with treatment plans and if you are under the care of health practitioners, check in with them on a regular basis.

Slide 31 – How to help someone with anxiety

Family members and friends can play an important role in helping people recover from anxiety.

Overlay Slide 31

• Let the person know if you've noticed a change in their behaviour.

• Spend time talking about the person's experiences and let them know that you're there to listen without being judgmental.

Overlay Slide 31

• Encourage the person to seek help. Assist the person to fnd out about available services and offer to accompany the person to

appointments.

Overlay Slide 31

• Acknowledge that the person has a disorder and is not just being difficult; the anxiety is a very real and distressing experience.

Overlay Slide 31

• Encourage the person to try to get enough sleep, exercise, eat well and use self-help strategies.

Overlay Slide 31

• Work with the person to re-establish a daily routine that includes enjoyable and/or relaxing activities.

Overlay Slide 31

• Invite the person out and keep in touch. Also encourage friends and family members to do the same, but don’t pressure the person to participate.

Overlay Slide 31

• Encourage the person to face their fears with support from their doctor/psychologist.

Overlay Slide 31

• Acknowledge any gains the person makes, no matter how small.

Now I'd like to spend a few minutes giving some practical tips for dealing with Panic Attacks

Slide 32 - Panic Attacks

There are three types of Panic Attacks

Situationally bound (cued): panic only when you see the object of fear [e.g. a spider]

Unexpected (uncued): unexpected, out of the blue

Situationally predisposed: you are more likely to have a panic attack **where** you have had one before (e.g. in a crowded restaurant), but it isn't inevitable — you don't know if it will happen today or whenever.

Slide 33 – Self-help strategies for panic attacks:

Here are a list of things we can do to help us cope with and minimise or eliminate panic attacks.

Overlay Slide 33

1. Avoid Caffeine, Alcohol and other Stimulants.

People who get panic attacks are often highly sensitive to caffeine and alcohol.

Overlay Slide 33

2. Eat more whole grains, rice and millet.

These foods are good sources of B vitamins, which have an overall calming effect and keep the nervous system healthy.

Stay away from foods with artificial colourings, additives and sugar, because they can make panic attacks worse.

Sensitivity to certain foods can trigger a panic attack. Food allergy testing is strongly recommended.

Overlay Slide 33

3. Learn and Practice Deep Breathing.

People often hyperventilate during a panic attack. So, it is important that you learn how to learn deep breathing to counteract the shallow breathing.

Take long, deep diaphragmatic breaths.

Overlay Slide 33

4. Alleviate stress, take time to eat, relax and sleep.

There are many techniques available for relaxation. One especially useful method is the progressive relaxation technique.

There is a free handout on our website.

Overlay Slide 33

5. Move Around, Stay active, Exercise.

Take a walk; move around; do some gentle stretching exercises, etc. Exercise helps you to burn off the excess adrenaline produced during stress initiation. It helps you to bounce back faster in anxious situations.

Overlay Slide 33

6. Keep perfumed handkerchiefs.

Keep a handkerchief with a few drops of lavender or rose essential oil. They are excellent relaxants.

Slide 34

7. Talk to yourself.

Talk to yourself rationalizing the fear of

Panic Attack. Your conversation may be like this: ‘Okay, I’m having a panic attack. I know it will pass and I will soon be out of it. I’m not having a heart attack or any other disease that is fatal. This won’t last long. It will pass. I’ll get through it.”

This self-talk should take the edge off the anxiety, and your symptoms should start to fade.

2 Corinthians 4:17

Use a “This Too Shall Pass” Card.

There is an Hebrew saying:
gam zeh yaavor, “this too shall pass.”

A Panic Attack will always end.

Take several slow breaths. Begin by holding your breath for ten seconds and then breathe out through your nose, saying “Relax” to yourself as you do so. Next, breathe in for three seconds and out for three seconds. Do this for a minute then repeat the first step. If need be, repeat this cycle several times.

THIS TOO, SHALL PASS.
When things are bad, remember:
It won’t always be this way.
Take one day at a time.
When things are good, remember:
It won’t always be this way.
Enjoy every great moment.

~Doe Zantamata (female) US author, artist, and photographer

Slide 35 (Overlay)

8. Keep your attention diverted.

Keeping your attention helps. There are many ways of accomplishing this like counting backward from 1000 at an increment of 3. This

takes your mind off your panic attack by refocusing your thinking.

Overlay Slide 35

9. Be interested in your own health and find out what works best for you.

Overlay Slide 35

10. A traumatic experience can be the root cause of panic attacks. Professional counselling can help the individual.

Now so far today we have talked about what anxiety is and how to manage it. We have looked at the various manifestations of anxiety from Post-traumatic stress to obsessive-compulsive disorder. We have also looked more specifically at panic attacks. Now I would like to close with a specific example of how we can put some of the things we have learned into a practical situation.

Slide 36 – Public Speaking Anxiety

I have chosen as an example Public Speaking, on of the most common producers of anxiety, just to demonstrate how we can implement some of the things I have shared. Some of these tips I implemented in my own

experience when I first started public speaking over 55 years ago. Once these become habits you may choose to forgo some and personalise others.

Overlay Slide 36

1. Realize that you will not be perfectly calm. Expect a certain level of anxiety, but realize that you can manage anxiety to work to your advantage.

Now, you may remember that I earlier talked about the anxiety response of fight or flight. At that time I also suggested adding the word ‘fortify’.

This is when we manage anxiety to work to our advantage.

If I am anxious that I will be late for a speaking appointment, I use that anxiety to motivate me into ensuring that I am early.

If I am anxious that I will forget my presentation, I use that anxiety to motivate me into ensuring that I have appropriate notes.

If I am anxious that technology will fail me on the day, I use that anxiety to motivate me into ensuring that my audio-visuals are only there to emphasise and enhance what I need to say rather than saying it for me (if the

projector bulb blows, my presentation is unaffected).

Overlay Slide 36

2. Try not to spend too much time before your presentation worrying. Don’t change your regular routine.

Overlay Slide 36

3. Arrive at the place where you are giving your speech early enough to get organized and feel comfortable with your surroundings.

Overlay Slide 36

4. Talk about topics that you are interested in or in which you have some expertise, special knowledge or practical experience.

Overlay Slide 36

5. Be prepared. Be organized. Make sure you rehearse out loud.

Overlay Slide 36

6. Use highlighters to emphasize the transitions and sources on your notes.

Overlay Slide 36

7. Deliver your speech with the same notes with which you rehearsed. Do not rewrite the notes unless you have plenty of time to practice with the new version.

Overlay Slide 36

8. Use n audio recorder to practice your speech. This will allow for the development of a conversational/natural speaking style.

Overlay Slide 36

9. Practice standing up as though you were actually giving the speech. If possible, go to the room you will speak in and rehearse there.

Overlay Slide 36

10. Practice your speech out loud. The ears have sense memory just as your body does, and you will retain more of the speech if you practice aloud.

Slide 37

11. Avoid writing your speech out word for word. Instead, work with concepts and ideas. It is natural and desirable for a speech to be phrased somewhat differently every time it is delivered.

Overlay Slide 37

12. Remember to breathe and swallow during your speech. Use the “punctuation” as places to breath and/or swallow.

Overlay Slide 37

13. If you suffer from cotton mouth, get a drink before speaking or have a throat lozenge before speaking (Choose one that won’t turn your tongue a funny colour).

Overlay Slide 37

14. It is perfectly acceptable to pause during a speech to collect your thoughts.

Overlay Slide 37

15. On the day of your speech, wear clothing that is comfortable. Rehearse in the clothes you plan to wear when you deliver your speech.

Overlay Slide 37

16. Try to just act naturally. Be yourself and let your personality come through.

Overlay Slide 37

17. If there is a chance that you will play

with your watch, earrings, rings, necklace, glasses, etc., take them off before giving the speech. However, don't call attention to this by waiting until your name is called for speaking.

Overlay Slide 37

18. Use gestures to release some of the physical tension. Don't try to freeze yourself. Practice in front of a mirror and watch your gestures.

Overlay Slide 37

19. If you stumble over a word or forget how to pronounce a word, simply say the word and go on with the speech. Don't call attention to it by apologizing profusely.

Overlay Slide 37

20. Be very familiar with your preview and transitions. This is easy for me as I write all my own material and do my own graphics.

I like to number my slides so that I can change the sequence during a presentation if required.

In PowerPoint® you can jump to a different slide simply by typing the number and pressing[Enter] or [Return].

If you blank in the middle of a main point, summarize it and go on to the next transition. Don't say things like "I don't know what the next point is" or "I forgot that point."

If you don't tell us, we probably won't know you forgot something.

Slide 38 – In conclusion

Today I will delete from my diary two days: yesterday and tomorrow. Yesterday was to learn and tomorrow will be the consequence of what I can do today.

Today I will face life with the conviction that this day will not ever return.

Today is the last opportunity I have to live intensely, as no one can assure me that I will see tomorrow's sunrise.

Today I will be brave enough not to let any opportunity pass me by, my only alternative is to succeed.

Today I will invest my most valuable resource: my time, in the most transcendental work: my life; I will spend each minute passionately to make of today a different and unique day in my life.

Today I will defy every obstacle that

appears on my way, trusting I will succeed.

Today I will resist pessimism and will conquer the world with a smile, with the positive attitude of expecting always the best.

Today I will make of every ordinary task a sublime expression,

Today I will have my feet on the ground understanding reality and the stars' gaze to invent my future.

Today I will take the time to be happy and will leave my footprints and my presence in the hearts of others.

Today, I invite you to begin a new season where we can dream that everything we undertake is possible and we fulfil it, with joy and dignity.

Have a good day and a better one tomorrow!

Slide 39 – Question Time

Bonus Slide – Error or Mistake?

Bonus material: Error or Mistake
(Included in response to a question submitted via email prior to the seminar)

How do we determine if a situation is an error or mistake?

An error is failing without experience whereas a mistake is failing despite experience.

This may be for a number of reasons, for example: burnout, self-punishment, revenge or even a cry for attention.

A case in point is when someone blames a person for having made a mistake, who has just made an error. In that case, the only person who has made a mistake is the one who has blamed the other person.

Let us remember that failure is only failure if we fail to try again Failure is simply a lack of success.

Very little comes out right the first time. Failures, repeated failures, are fingerprints on the road to achievement.

When the great Polish pianist, Ignace Paderewski, first chose to study the piano, his music teacher told him his hands were much too small to master the keyboard.

When the great Italian tenor, Enrico Caruso, first applied for instruction, the teacher told him his voice sounded like the wind whistling through the window.

Overcoming [52] Anxiety

When the great statesman of Victorian England, Benjamin Disraeli, attempted to speak in Parliament for the first time, members hissed him into silence and laughed when he said, "Though I sit down now, the time will come when you will hear of me."

Henry Ford forgot to put a reverse gear in his first car.

Albert Einstein failed his university entrance exams at his first attempt.

Thomas Edison spent $2,000,000 on an invention which proved to be of little value.

Abraham Lincoln's life could demonstrate that the only time you do not fail is the last time you try something and it works. We can "fail forward" toward success.

Christopher Columbus was obsessed with the idea that he could get to the East by traveling west, but by sailing west he never did reach India. He failed, but changed the course of history by discovering America, a great achievement.

If you set out to do something great enough, what you do incidentally may be of more significance than that which is accomplished on purpose by someone else.

FIN

Overcoming [53] Anxiety

Today's seminar:

Overcoming Anxiety

www.lrhartley.com/seminars

Welcome
Overcoming
Anxiety
Seminar

Who is your speaker for today?

Lionel Hartley, author, radio broadcaster, public speaker and retired sociologist. He was a Lifestyle Educator and Family-life Counsellor for over three decades. He is a grandparent, married to Rosemary with three grown children.

We welcome your participation in today's seminar.

Time will be allowed at the end of today's seminar for your questions

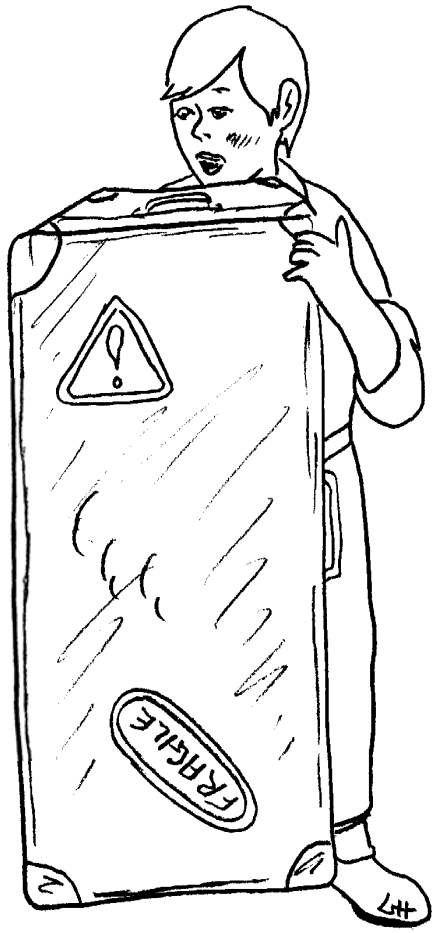


Illustration from **"Not Finished Yet – Chronicles in the Life of Peter Blank"**

Lionel D C Hartley, DipAdmin(NZIM), HonDip (DramArt), DipTheol (SDB), RGN (Psy, PsyPaed, Admin, Nutn), DipBusLaw, DipEcon, DipAccy, BA (Lit), MA, PhD [etc.]

www.hartleyonline.blogspot.com

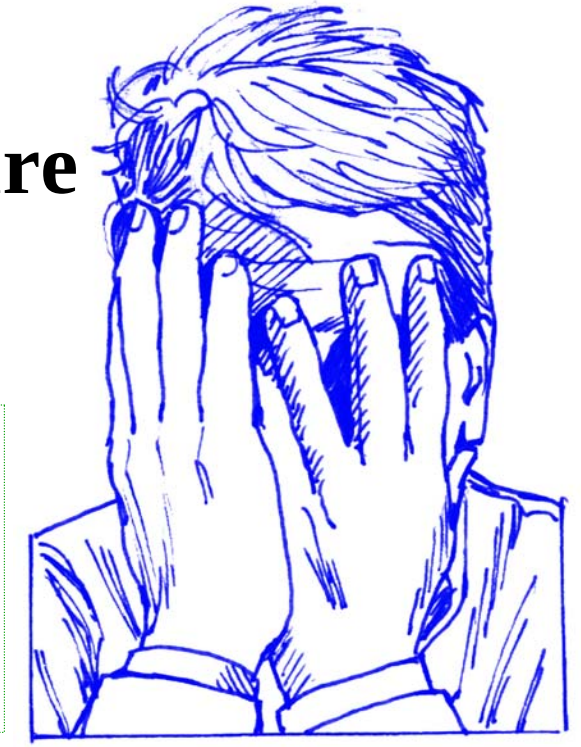
What is Anxiety?

1. Distress about future uncertainties...

a. Mental agitation and uneasiness

b. Mild or severe

2. What may happen in the future



Anxiety does not empty tomorrow
of its sorrows but only empties
today of its strength.
— Charles Haddon Spurgeon (1834-1892)

Anxiety versus Fear

- **ANXIETY**

- Anxious apprehension and worry that is a more general reaction that is out of proportion to threats in environment

- Future oriented

- Can be adaptive if not excessive

Anxiety versus Fear

- **ANXIETY**

- Anxious apprehension and worry that is a more general reaction that is out of proportion to threats in environment

- Future oriented

- Can be adaptive if not excessive

- **FEAR**

- Experienced when a person is faced with real and immediate danger.

- Present-oriented

- Can be adaptive

Epidemiology of Anxiety

- **Prevalence:**
  - **Anxiety disorders are more common than any other form of mental disorders.**

- **Comorbidity:**
  - **High comorbidity among different anxiety disorders.**
  - **High level of comorbidity between anxiety and depression.**

Today is the tomorrow we worried about yesterday.
— Author Unknown

Anxiety Vs Anxiety Disorders

Anxiety disorders are

"…psychological disorders characterized by tension, over-activity of the autonomic nervous system, expectation of impending disaster, and continuous vigilance for danger."

— Carlson, 2000

Anxiety should be treated if it is

1. **Intense**
2. **Chronic**
3. **Limiting**

One cannot remove anxiety
by arguing it away.
— Paul Johannes Oskar Tillich (1886-1965)

Other symptoms of anxiety

- Fast heart beat
- Headaches
- Irritability
- Muscle tension
- Poor concentration
- Restlessness
- Sleep problems
- Sweats
- Tiring easily
- Trembling

How much pain they have cost us,
the evils which have never happened.
— Thomas Jefferson

What Causes Anxiety?

- **Family history of mental health problems**

What Causes Anxiety?

- **Family history of mental health problems**
- **Real or imagined threats to our well-being**

What Causes Anxiety?

- Family history of mental health problems
- Real or imagined threats to our well-being
- **Stressful life events**
  - **job stress or changing jobs**
  - **change in living arrangements**
  - **pregnancy and giving birth**
  - **family and relationship problems**
  - **experiencing a major emotional shock following a stressful or traumatic event**
  - **experiencing verbal, sexual, physical or emotional abuse or trauma**
  - **death or loss of a loved one**

What Causes Anxiety?

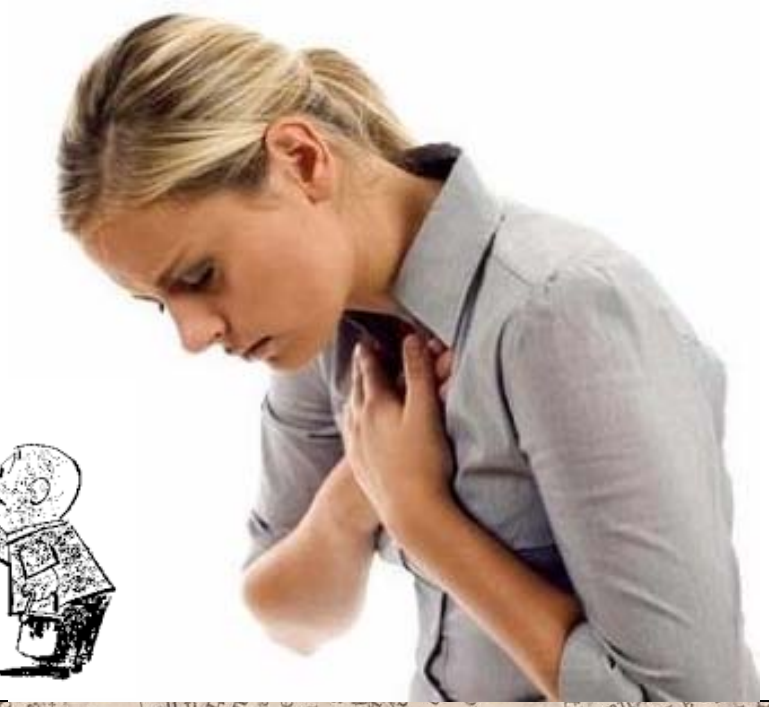
- Family history of mental health problems
- Real or imagined threats to our well-being
- Stressful life events
- **Physical health problems**
  - **hormonal problems**
  - **diabetes**
  - **asthma**
  - **heart disease**

What Causes Anxiety?

- Family history of mental health problems
- Real or imagined threats to our well-being
- Stressful life events
- Physical health problems
- **Substance use**

What Causes Anxiety?

- Family history of mental health problems
- Real or imagined threats to our well-being
- Stressful life events
- Physical health problems
- Substance use
- **Personality factors**



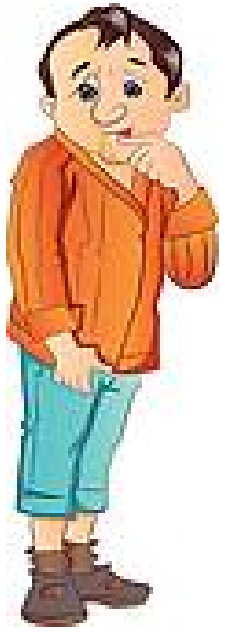
Anxiety has four main elements

a. Insecurity

Something bad is going to happen

b. Helplessness

There is nothing I can do



c. Isolation

There is no one to help me

d. Response

Fight, flight, freeze, fling, faint, fortify

Types of anxiety

- **Social phobia**
- **Generalised Anxiety Disorder (GAD)**
- **Specific phobias**
- **Obsessive compulsive disorder (OCD)**
- **Post-Traumatic Stress Disorder (PTSD)**
- **Panic disorder**

If you treat every situation as a life and death matter, you'll die a lot of times.
— Dean Smith

Social phobia

- **An intense fear of criticism, being embarrassed or humiliated**

Generalised Anxiety Disorder (GAD)

- **Feels anxious on most days**
- **Worrying about lots of different things**
- **Over a period of six months or more**

Specific phobias

- **Feels very fearful about a particular object or situation**
- **May go to great lengths to avoid the object or situation**

Obsessive-Compulsive Disorder (OCD)

- **Obsessions: intrusive & nonsensical thoughts, images, urges that one tries to resist or eliminate**

- **Compulsions: thoughts or actions designed to suppress the thoughts & provide relief**

Post-Traumatic Stress Disorder (PTSD)

- **After a person experiences a traumatic event**
  - **Difficulty relaxing**
  - **Upsetting dreams**
  - **Flashbacks of the event**
  - **Avoidance of anything related to the event**

- **Diagnosed when a person has symptoms for at least a month**

Panic Disorder

- **Panic attacks**
  - **Intense**
  - **Overwhelming**
  - **Often uncontrollable feelings of anxiety**
  - **Combined with a range of physical symptoms**

Panic Disorder

Panic disorder is the presence of:

- **recurrent, unexpected panic attacks followed by at least 1 month of persistent concern about having another attack**
- **worry about the possible implications of the panic attacks**
- **significant behavioral change related to the attacks.**

Panic is a sudden desertion of us, and a going over to the enemy of our imagination.
— Christian Nevell Bovee

Treatments for anxiety

Treatments for anxiety

- **Psychological treatments**
  - **Cognitive behaviour therapy (CBT)**

Treatments for anxiety

- **Psychological treatments**
  - **Cognitive behaviour therapy (CBT)**
- **Medical treatments**
  - **Antidepressant medication *(Antidepressants)***
  - **Benzodiazepines *(Sedatives)***

Treatments for anxiety

- **Psychological treatments**
  - **Cognitive behaviour therapy (CBT)**
- **Medical treatments**
  - **Antidepressant medication *(Antidepressants)***
  - **Benzodiazepines *(Sedatives)***
- **Lifestyle changes and self-help**

How to help yourself

How to help yourself

- **Prayer**

How to help yourself

- Prayer
- **Postpone major life changes**

How to help yourself

- Prayer
- Postpone major life changes
- **Resolve personal conflicts as they arise**

How to help yourself

- Prayer
- Postpone major life changes
- Resolve personal conflicts as they arise
- **Simplify your life**
  - **make your schedule less hectic**

How to help yourself

- Prayer
- Postpone major life changes
- Resolve personal conflicts as they arise
- Simplify your life
  - make your schedule less hectic
- **Take part in enjoyable activities**
  - **learn to relax and reduce stress**

How to help yourself

- Prayer
- Postpone major life changes
- Resolve personal conflicts as they arise
- Simplify your life
  - make your schedule less hectic
- Take part in enjoyable activities
  - learn to relax and reduce stress
- **Maintain a healthy lifestyle**

How to help yourself

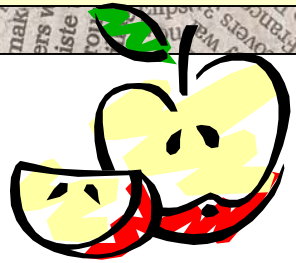
- Prayer
- Postpone major life changes
- Resolve personal conflicts as they arise
- Simplify your life by making your schedule less hectic
- Take part in enjoyable activities and learn to relax
- Maintain a healthy lifestyle
- **Consider your diet**

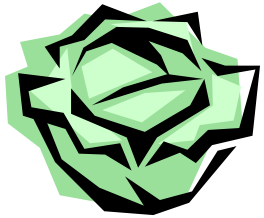
Food Choices

Basic Foods

(Plant Based)

- Fruits
- Vegetables
- Nuts
- Grains
- Cereals
- Examples: Breads
  - Pasta
  - Potatoes





Bonus Foods

(Non-plant Based)

- Meat
- Cheese
- Cake
- Biscuits
- Chocolate
- Chips
- Snacks & Sweets

How to help yourself

- **Prayer**
- **Postpone major life changes**
- **Resolve personal conflicts as they arise**
- **Simplify your life by making your schedule less hectic**
- **Take part in enjoyable activities and learn to relax**
- **Maintain a healthy lifestyle**
- **Consider your diet**

How to help yourself

- Prayer
- Postpone major life changes
- Resolve personal conflicts as they arise
- Simplify your life by making your schedule less hectic
- Take part in enjoyable activities and learn to relax
- Maintain a healthy lifestyle
- Consider your diet
- **Physical exercise**

How to help yourself

- Prayer
- Postpone major life changes
- Resolve personal conflicts as they arise
- Simplify your life by making your schedule less hectic
- Take part in enjoyable activities and learn to relax
- Maintain a healthy lifestyle
- Consider your diet
- **Physical exercise**
- **Get plenty of rest and sleep**

How to help yourself

- Prayer
- Postpone major life changes
- Resolve personal conflicts as they arise
- Simplify your life by making your schedule less hectic
- Take part in enjoyable activities and learn to relax
- Maintain a healthy lifestyle
- Consider your diet
- **Physical exercise**
- **Get plenty of rest and sleep**
- **Deep-breathing exercises**

How to help yourself

- Prayer
- Postpone major life changes
- Resolve personal conflicts as they arise
- Simplify your life by making your schedule less hectic
- Take part in enjoyable activities and learn to relax
- Maintain a healthy lifestyle
- Consider your diet
- **Physical exercise**
- **Get plenty of rest and sleep**
- **Deep-breathing exercises**
- **Massage**

How to help yourself

- Consider your diet
- Physical exercise
- Get plenty of rest and sleep
- Deep-breathing exercises
- Massage

How to help yourself

- Consider your diet
- Physical exercise
- Get plenty of rest and sleep
- Deep-breathing exercises
- Massage
- **Dry skin-brushing**

How to help yourself

- Consider your diet
- Physical exercise
- Get plenty of rest and sleep
- Deep-breathing exercises
- Massage

- Dry skin-brushing
- **The lower-extremity cold-water rub**

How to help yourself

- Consider your diet
- Physical exercise
- Get plenty of rest and sleep
- Deep-breathing exercises
- Massage

- Dry skin-brushing
- The lower-extremity cold-water rub
- **Learn a relaxation technique and practice it**

How to help yourself

- Consider your diet
- Physical exercise
- Get plenty of rest and sleep
- Deep-breathing exercises
- Massage

- Dry skin-brushing
- The lower-extremity cold-water rub
- Learn a relaxation technique and practice it
- **Call a trusted friend or family member**

How to help yourself

- Consider your diet
- Physical exercise
- Get plenty of rest and sleep
- Deep-breathing exercises
- Massage

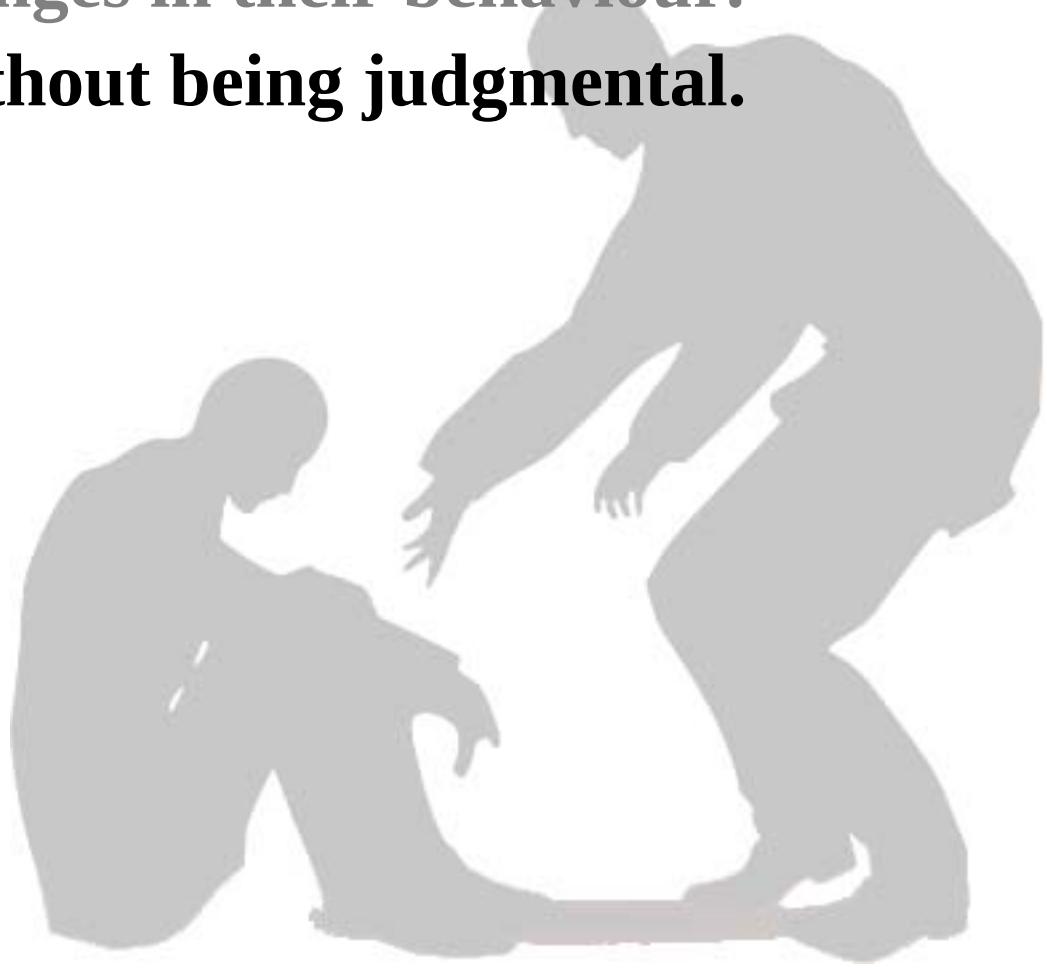
- **Dry skin-brushing**
- **The lower-extremity cold-water rub**
- **Learn a relaxation technique and practice it**
- **Call a trusted friend or family member**
- **Regular check-ups (medical or mental health)**

How to help someone with anxiety

- **Tell of observed changes in their behaviour.**

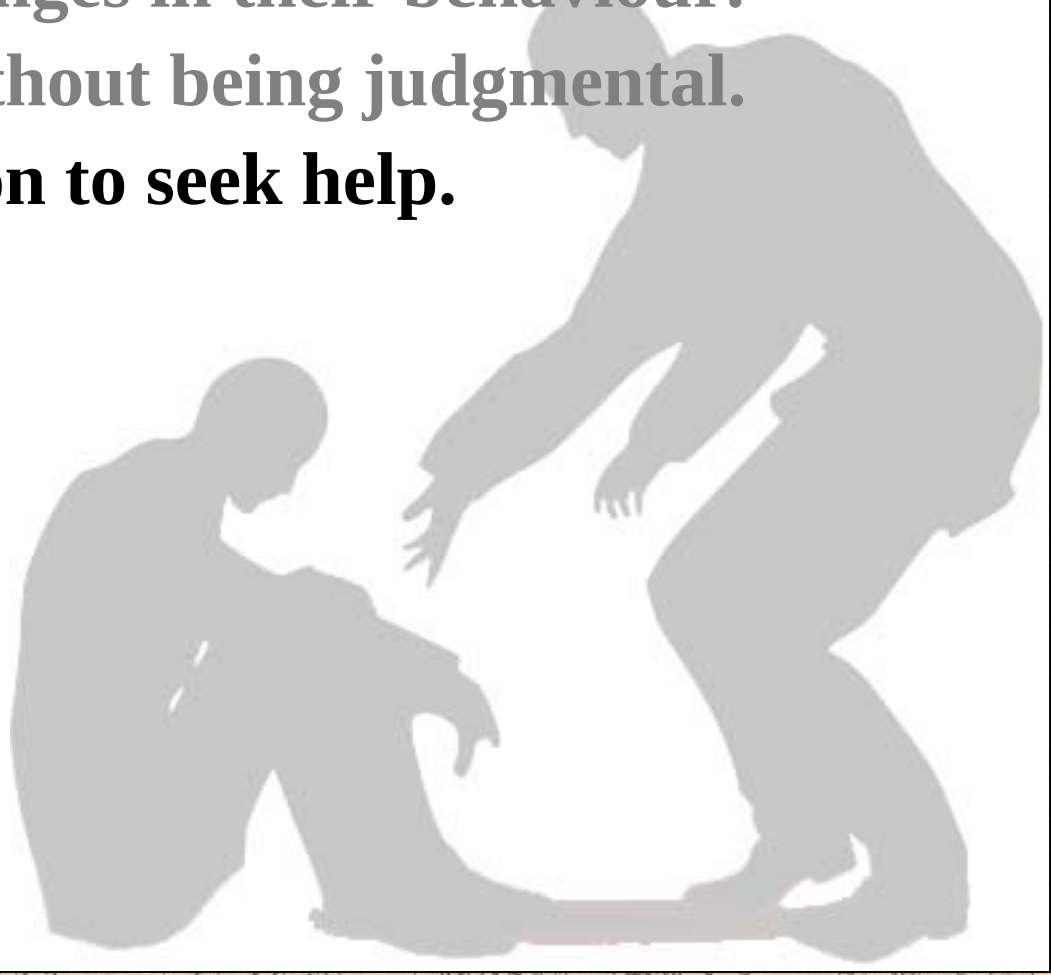
How to help someone with anxiety

- Tell of observed changes in their behaviour.
- **Be there to listen without being judgmental.**



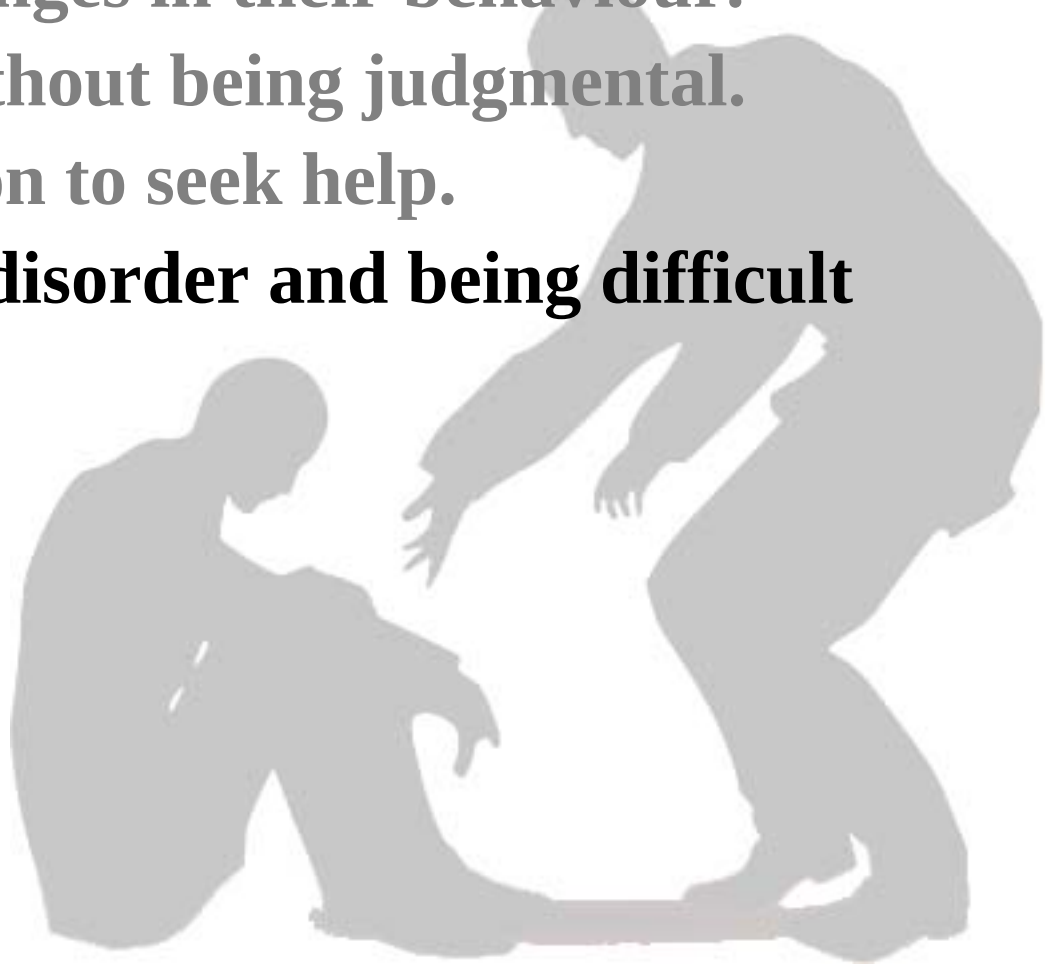
How to help someone with anxiety

- Tell of observed changes in their behaviour.
- Be there to listen without being judgmental.
- **Encourage the person to seek help.**



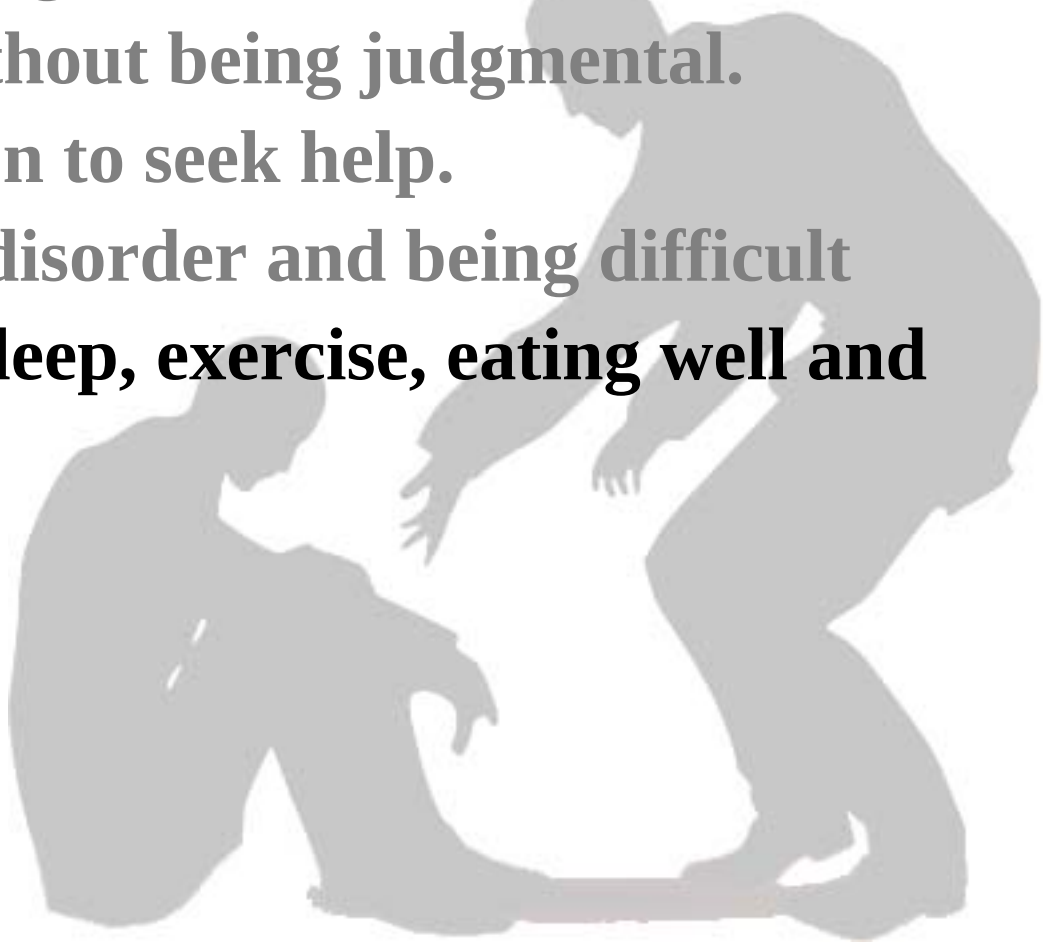
How to help someone with anxiety

- Tell of observed changes in their behaviour.
- Be there to listen without being judgmental.
- Encourage the person to seek help.
- **Difference between disorder and being difficult**



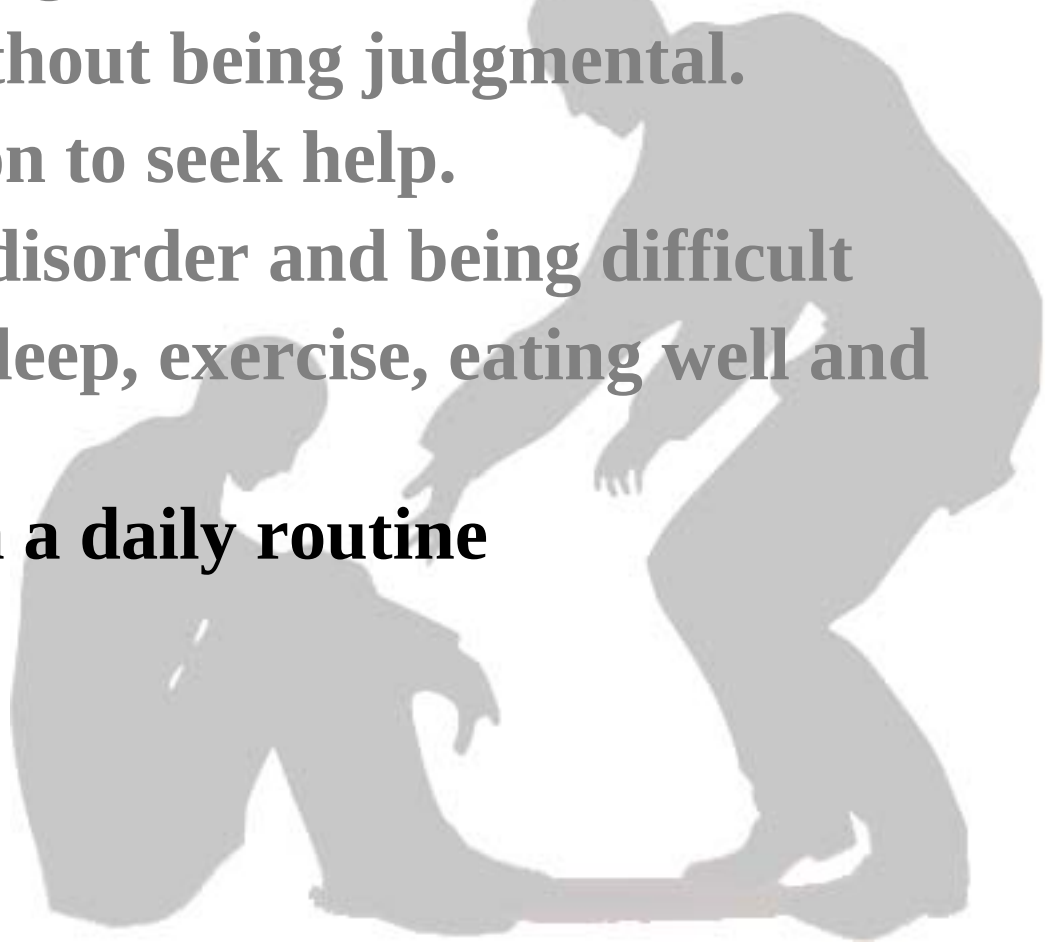
How to help someone with anxiety

- Tell of observed changes in their behaviour.
- Be there to listen without being judgmental.
- Encourage the person to seek help.
- Difference between disorder and being difficult
- **Encourage enough sleep, exercise, eating well and self-help strategies.**



How to help someone with anxiety

- Tell of observed changes in their behaviour.
- Be there to listen without being judgmental.
- Encourage the person to seek help.
- Difference between disorder and being difficult
- Encourage enough sleep, exercise, eating well and self-help strategies.
- **Assist to re-establish a daily routine**



How to help someone with anxiety

- Tell of observed changes in their behaviour.
- Be there to listen without being judgmental.
- Encourage the person to seek help.
- Difference between disorder and being difficult
- Encourage enough sleep, exercise, eating well and self-help strategies.
- Assist to re-establish a daily routine
- **Invite the person out and keep in touch.**

How to help someone with anxiety

- Tell of observed changes in their behaviour.
- Be there to listen without being judgmental.
- Encourage the person to seek help.
- Difference between disorder and being difficult
- Encourage enough sleep, exercise, eating well and self-help strategies.
- Assist to re-establish a daily routine
- Invite the person out and keep in touch.
- **Encourage the person to face their fears with support**

How to help someone with anxiety

- Tell of observed changes in their behaviour.
- Be there to listen without being judgmental.
- Encourage the person to seek help.
- Difference between disorder and being difficult
- Encourage enough sleep, exercise, eating well and self-help strategies.
- Assist to re-establish a daily routine
- Invite the person out and keep in touch.
- Encourage the person to face their fears with support
- **Acknowledge any gains no matter how small.**

Panic Attacks

- **Three types of Panic Attacks**
  - **Situationally bound (cued)**
  - **Unexpected (uncued)**
  - **Situationally predisposed**

Panic Attacks

1. Avoid Caffeine, Alcohol and other Stimulants.

Panic Attacks

1. Avoid Caffeine, Alcohol and other Stimulants.
2. Eat more whole grains, rice and millet.

Panic Attacks

1. Avoid Caffeine, Alcohol and other Stimulants.
2. Eat more whole grains, rice and millet.
3. **Learn and Practice Deep Breathing.**

Panic Attacks

1. Avoid Caffeine, Alcohol and other Stimulants.
2. Eat more whole grains, rice and millet.
3. Learn and Practice Deep Breathing.
4. **Alleviate stress, take time to eat, relax and sleep.**

Online Handout Password: relax05

Panic Attacks

1. Avoid Caffeine, Alcohol and other Stimulants.
2. Eat more whole grains, rice and millet.
3. Learn and Practice Deep Breathing.
4. Alleviate stress, take time to eat, relax and sleep.

Online Handout Password: relax05

5. Move Around, Stay active, Exercise.

Panic Attacks

1. Avoid Caffeine, Alcohol and other Stimulants.
2. Eat more whole grains, rice and millet.
3. Learn and Practice Deep Breathing.
4. Alleviate stress, take time to eat, relax and sleep.

Online Handout Password: relax05

5. Move Around, Stay active, Exercise.
6. Keep perfumed handkerchiefs.

גם זה יעבור

7. Talk to yourself. Use a *"This Too, Shall Pass"* Card.

When things are bad, remember:

It won't always be this way…

Take one day at a time.

When things are good, remember:

It won't always be this way…

Enjoy every great moment.

— Doe Zantamata

Password: relax05

Panic Attacks

7. Talk to yourself. Use a "This Too Shall Pass" Card.

Love looks forward, hate looks back,
anxiety has eyes all over its head.
— Mignon McLaughlin, *The Neurotic's Notebook*, 1960

Password: relax05

Panic Attacks

7. Talk to yourself. Use a "This Too Shall Pass" Card.

8. Keep your attention diverted.

Love looks forward, hate looks back,
anxiety has eyes all over its head.
— Mignon McLaughlin, *The Neurotic's Notebook*, 1960

Password: relax05

Panic Attacks

7. Talk to yourself. Use a "This Too Shall Pass" Card.
8. **Keep your attention diverted.**
9. **Be interested in your own health - find out what works best for you.**

Love looks forward, hate looks back,
anxiety has eyes all over its head.
— Mignon McLaughlin, *The Neurotic's Notebook*, 1960

Password: relax05

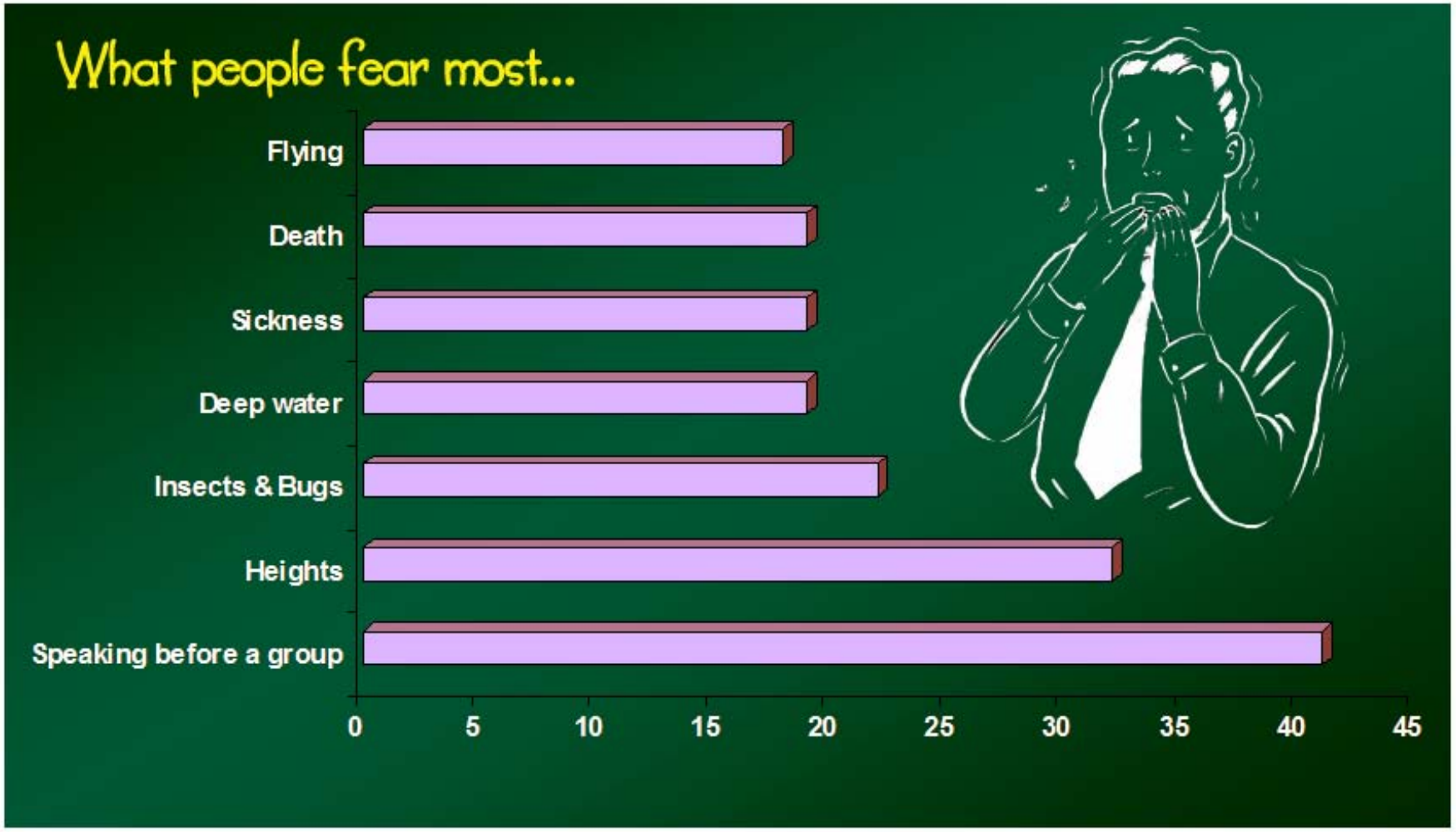
Panic Attacks

7. Talk to yourself. Use a "This Too Shall Pass" Card.
8. **Keep your attention diverted.**
9. **Be interested in your own health - find out what works best for you.**
10. **Professional counselling for trauma triggers**

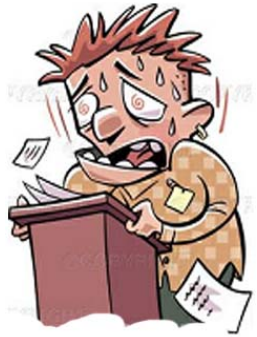
Love looks forward, hate looks back,
anxiety has eyes all over its head.
— Mignon McLaughlin, *The Neurotic's Notebook*, 1960

Password: relax05

Public Speaking Anxiety



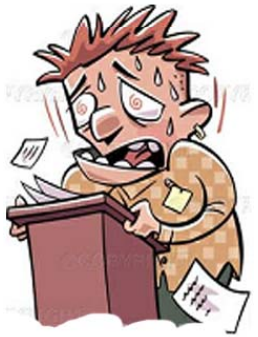
Public Speaking Anxiety



Password: speak14

Public Speaking Anxiety

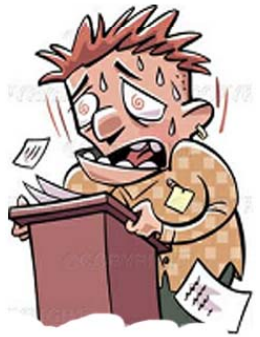
1. Use anxiety to your advantage *("Fortify your mind")*



Password: speak14

Public Speaking Anxiety

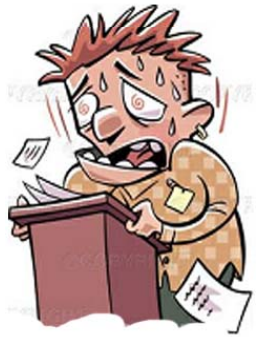
1. Use anxiety to your advantage *("Fortify your mind")*
2. **Usual regular routine before presentation**



Password: speak14

Public Speaking Anxiety

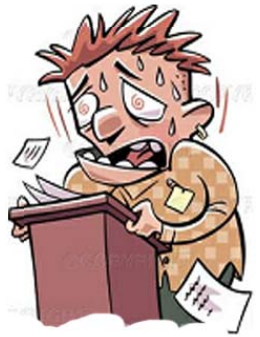
1. Use anxiety to your advantage *("Fortify your mind")*
2. Usual regular routine before presentation
3. **Arrive early**



Password: speak14

Public Speaking Anxiety

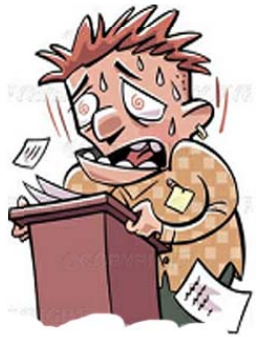
1. Use anxiety to your advantage *("Fortify your mind")*
2. Usual regular routine before presentation
3. Arrive early
4. **Talk about topics that you are interested in**



Password: speak14

Public Speaking Anxiety

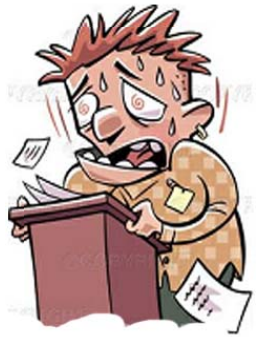
1. Use anxiety to your advantage *("Fortify your mind")*
2. Usual regular routine before presentation
3. Arrive early
4. Talk about topics that you are interested in
5. **Be prepared; Be organized**



Password: speak14

Public Speaking Anxiety

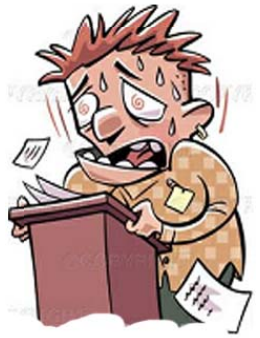
1. Use anxiety to your advantage *("Fortify your mind")*
2. Usual regular routine before presentation
3. Arrive early
4. Talk about topics that you are interested in
5. Be prepared; Be organized
6. **Use highlighters in your notes**



Password: speak14

Public Speaking Anxiety

1. Use anxiety to your advantage *("Fortify your mind")*
2. Usual regular routine before presentation
3. Arrive early
4. Talk about topics that you are interested in
5. Be prepared; Be organized
6. Use highlighters in your notes
7. **Deliver your speech with same notes as rehearsal**



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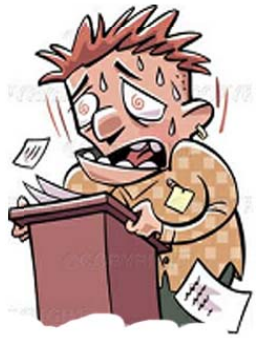
Public Speaking Anxiety

1. Use anxiety to your advantage *("Fortify your mind")*
2. Usual regular routine before presentation
3. Arrive early
4. Talk about topics that you are interested in
5. Be prepared; Be organized
6. Use highlighters in your notes
7. Deliver your speech with same notes as rehearsal
8. **Use an audio recorder to practice your speech**



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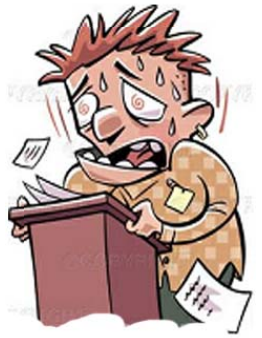
Public Speaking Anxiety

1. Use anxiety to your advantage *("Fortify your mind")*
2. Usual regular routine before presentation
3. Arrive early
4. Talk about topics that you are interested in
5. Be prepared; Be organized
6. Use highlighters in your notes
7. Deliver your speech with same notes as rehearsal
8. Use an audio recorder to practice your speech
9. **Practice standing up to present speech**



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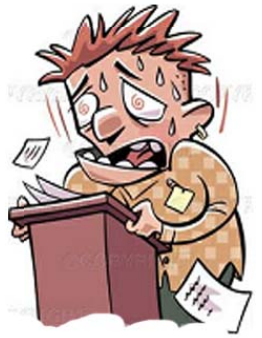
Public Speaking Anxiety

1. Use anxiety to your advantage *("Fortify your mind")*
2. Usual regular routine before presentation
3. Arrive early
4. Talk about topics that you are interested in
5. Be prepared; Be organized
6. Use highlighters in your notes
7. Deliver your speech with same notes as rehearsal
8. Use an audio recorder to practice your speech
9. Practice standing up to present speech
10. **Practice your speech out loud**



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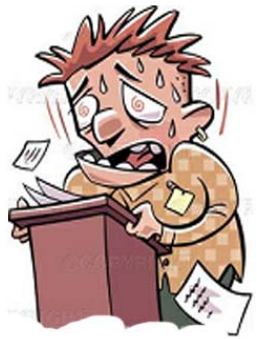
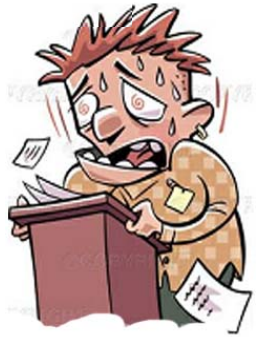
Public Speaking Anxiety



Password: speak14

Public Speaking Anxiety

11. Avoid writing your speech out word for word

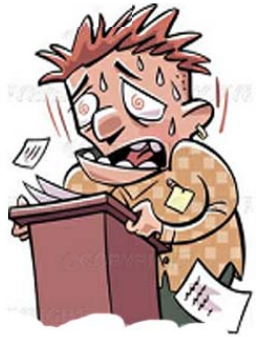


Password: speak14

Public Speaking Anxiety

11. Avoid writing your speech out word for word

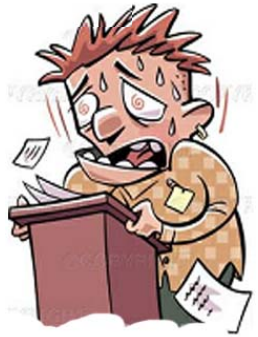
12. Remember to breathe and swallow



Password: speak14

Public Speaking Anxiety

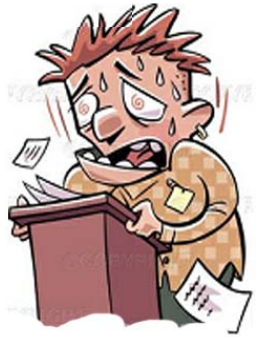
11. Avoid writing your speech out word for word
12. Remember to breathe and swallow
13. **Use a throat lozenge before speaking**



Password: speak14

Public Speaking Anxiety

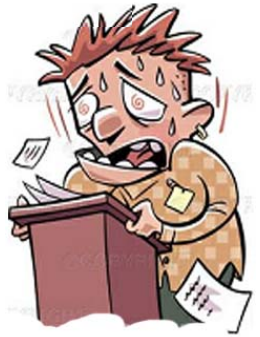
11. Avoid writing your speech out word for word
12. Remember to breathe and swallow
13. Use a throat lozenge before speaking
14. **Remember to pause during your speech**



Password: speak14

Public Speaking Anxiety

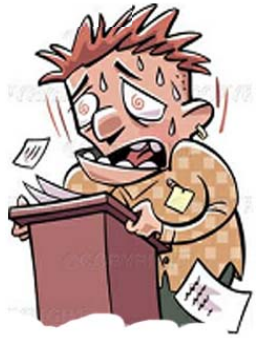
11. Avoid writing your speech out word for word
12. Remember to breathe and swallow
13. Use a throat lozenge before speaking
14. Remember to pause during your speech
15. **Wear clothing that is comfortable**



Password: speak14

Public Speaking Anxiety

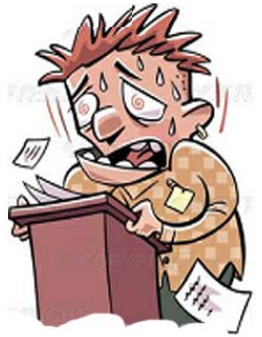
11. Avoid writing your speech out word for word
12. Remember to breathe and swallow
13. Use a throat lozenge before speaking
14. Remember to pause during your speech
15. Wear clothing that is comfortable
16. **Act naturally; Be yourself**



Password: speak14

Public Speaking Anxiety

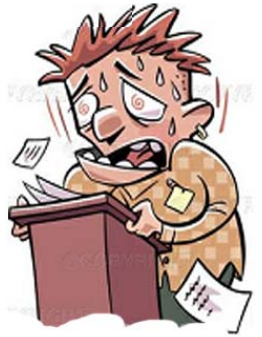
11. Avoid writing your speech out word for word
12. Remember to breathe and swallow
13. Use a throat lozenge before speaking
14. Remember to pause during your speech
15. Wear clothing that is comfortable
16. Act naturally; Be yourself
17. **Remove items you may fiddle with**



Password: speak14

Public Speaking Anxiety

11. Avoid writing your speech out word for word
12. Remember to breathe and swallow
13. Use a throat lozenge before speaking
14. Remember to pause during your speech
15. Wear clothing that is comfortable
16. Act naturally; Be yourself
17. Remove items you may fiddle with
18. **Use gestures**



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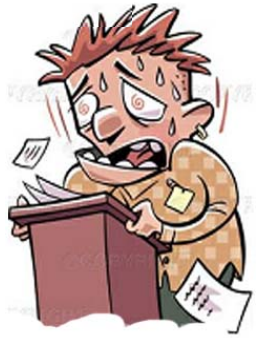
Public Speaking Anxiety

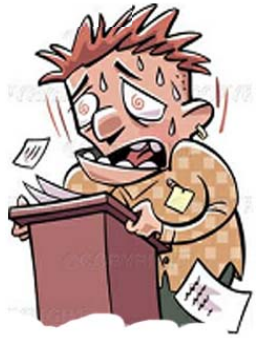
11. Avoid writing your speech out word for word
12. Remember to breathe and swallow
13. Use a throat lozenge before speaking
14. Remember to pause during your speech
15. Wear clothing that is comfortable
16. Act naturally; Be yourself
17. Remove items you may fiddle with
18. Use gestures
19. **If you stumble – continue**



Password: speak14

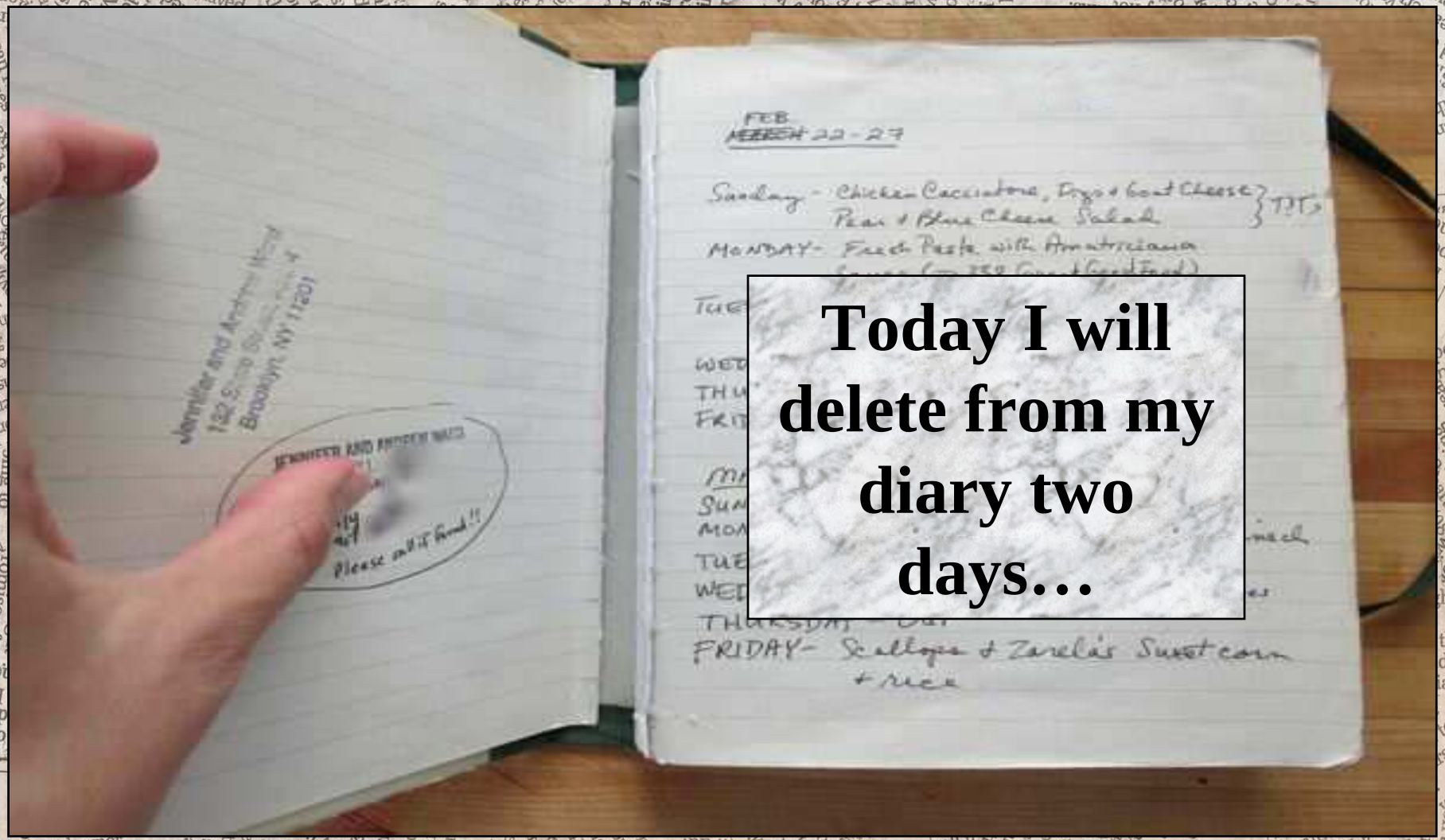
Public Speaking Anxiety

11. Avoid writing your speech out word for word
12. Remember to breathe and swallow
13. Use a throat lozenge before speaking
14. Remember to pause during your speech
15. Wear clothing that is comfortable
16. Act naturally; Be yourself
17. Remove items you may fiddle with
18. Use gestures
19. If you stumble – continue
20. **Be very familiar with your notes and visuals**



Password: speak14

And in conclusion…



Question Time

He who fears he shall suffer, already suffers what he fears.
— Montaigne, *Essays*, 1588

Error or Mistake?

Failure
lack of success

Error
Failing without experience

Mistake
Failing despite experience

Possible reasons:
Burnout
Selfpunishment
Revenge
Cry for attention

The case:
Someone blames a person for having made a mistake, who has just made an error.
In that case:
The only person who has made a mistake is the one who has blamed the other person.